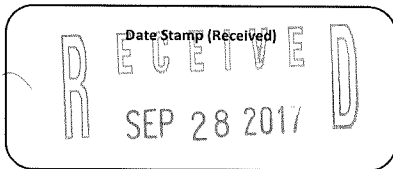


SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:
Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN



Permit #:	17-0472
Date:	12-1-17
Amount Paid:	\$255 10-4-17
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

Bayfield Co. Zoning Dept.

TYPE OF PERMIT REQUESTED → <input type="checkbox"/> LAND USE <input type="checkbox"/> SANITARY <input type="checkbox"/> PRIVY <input type="checkbox"/> CONDITIONAL USE <input type="checkbox"/> SPECIAL USE <input type="checkbox"/> B.O.A. <input type="checkbox"/> OTHER												
Owner's Name: Mogashean Properties LLC			Mailing Address: 23380 Missionary Pt Dr Cable WI 54821			City/State/Zip: Cable WI 54821			Telephone: 715-794-2113			
Address of Property: 23380 Missionary Point Drive			City/State/Zip: Cable WI 54821						Cell Phone: 715-380-0970			
Contractor: Henry Rieckhoff			Contractor Phone: 715-794-2113			Plumber: none			Plumber Phone:			
Authorized Agent: (Person signing Application on behalf of Owner(s)) Henry Rieckhoff			Agent Phone: 715-794-2113			Agent Mailing Address (include City/State/Zip): Cable WI 54821 23380 Missionary Point Dr			Written Authorization Attached <input type="checkbox"/> Yes <input type="checkbox"/> No			
PROJECT LOCATION		Legal Description: (Use Tax Statement) 17015			Tax ID#			Recorded Document: (i.e. Property Ownership) 2013R-55104 1113-59				
1/4, 1/4 East 20 Rods		Gov't Lot 7		Lot(s)		CSM		Vol & Page 1113 P57648		Subdivision:		
Section 34, Township 44 N, Range 6 W						Town of: Grand View			Lot Size		Acreage 12.006	

<input type="checkbox"/> Shoreland →	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes---continue →	Distance Structure is from Shoreline : _____ feet	Is Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<input checked="" type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes---continue →	Distance Structure is from Shoreline : 158 feet		
<input type="checkbox"/> Non-Shoreland				

Value at Time of Completion * include donated time & material	Project	# of Stories	Foundation	# of bedrooms	What Type of Sewer/Sanitary System Is on the property?	Water
\$ 75,000	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> 1-Story	<input type="checkbox"/> Basement	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input checked="" type="checkbox"/> 1-Story + Loft	<input checked="" type="checkbox"/> Foundation	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type: _____	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input checked="" type="checkbox"/> 2-Story	<input type="checkbox"/> _____	<input type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type: _____	<input type="checkbox"/> _____
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/> _____		<input type="checkbox"/> _____	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	
	<input type="checkbox"/> Run a Business on Property		Use	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	
	<input type="checkbox"/> _____		<input checked="" type="checkbox"/> Year Round		<input type="checkbox"/> Compost Toilet	
			<input type="checkbox"/> _____		<input checked="" type="checkbox"/> None	

Existing Structure: (if permit being applied for is relevant to it)	Length: 26	Width: 40	Height: 20
Proposed Construction:	Length: 26	Width: 40	Height: 20

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
Rec'd for I Residential Use DEC 01/17 Secretarial	<input type="checkbox"/>	Principal Structure (first structure on property)	(X)	
	<input type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	(X)	
		with Loft	(X)	
		with a Porch	(X)	
		with (2nd) Porch	(X)	
		with a Deck	(X)	
		with (2nd) Deck	(X)	
<input checked="" type="checkbox"/> Commercial Use		with Attached Garage	(X)	
<input type="checkbox"/> Municipal Use	<input type="checkbox"/>	Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	(X)	
	<input type="checkbox"/>	Mobile Home (manufactured date) _____	(X)	
	<input type="checkbox"/>	Addition/Alteration (specify) _____	(X)	
	<input checked="" type="checkbox"/>	Accessory Building (specify) Garage Storage	(26 X 40)	1,064
	<input type="checkbox"/>	Accessory Building Addition/Alteration (specify) _____	(26 X 40)	
	<input type="checkbox"/>	Special Use: (explain) _____	(X)	
	<input type="checkbox"/>	Conditional Use: (explain) _____	(X)	
	<input type="checkbox"/>	Other: (explain) _____	(X)	

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): _____
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Date _____

Authorized Agent: _____
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Date 9/28/17

Address to send permit 23380 Missionary Point Drive, Cable, WI 54821

Attach
Copy of Tax Statement

If you recently purchased the property send your Recorded Deed

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

Zoning District - Wetland Map

In the box below: Draw or Sketch your Property (regardless of what you are applying for)

- (1) Show Location of:

Proposed Construction
- (2) Show / Indicate:

North (N) on Plot Plan
- (3) Show Location of (*):

(*) Driveway and (*) Frontage Road (Name Frontage Road)
- (4) Show:

All Existing Structures on your Property
- (5) Show:

(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)
- (6) Show any (*):

(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond
- (7) Show any (*):

(*) Wetlands; or (*) Slopes over 20%

Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

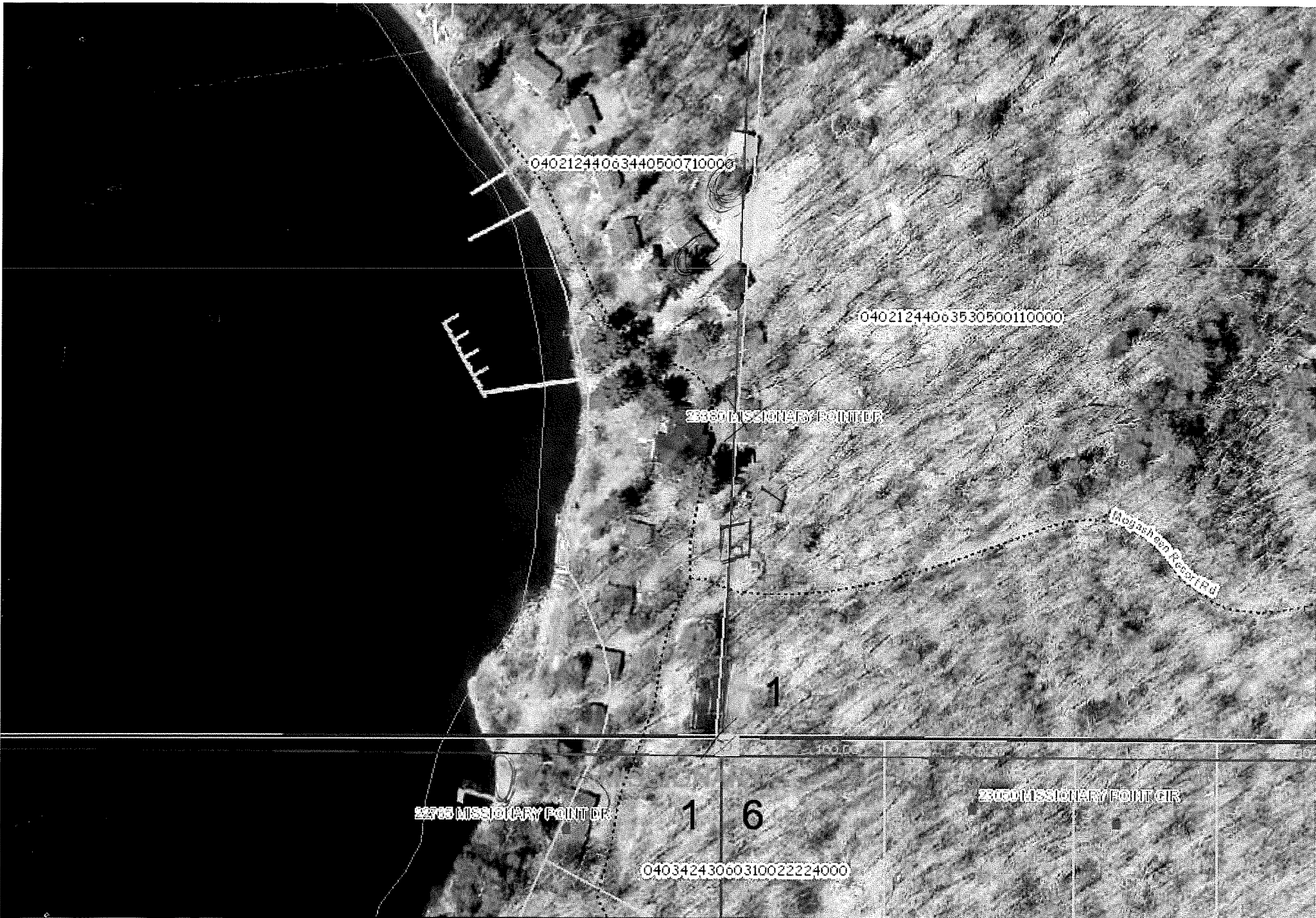
(8) Setbacks: (measured to the closest point)

Description	Measurement		Description	Measurement
Setback from the Centerline of Platted Road		Feet	Setback from the Lake (ordinary high-water mark)	158 Feet
Setback from the Established Right-of-Way	990	Feet	Setback from the River, Stream, Creek	Feet
			Setback from the Bank or Bluff	Feet
Setback from the North Lot Line		Feet		
Setback from the South Lot Line	207	Feet	Setback from Wetland	Feet
Setback from the West Lot Line	158	Feet	20% Slope Area on the property	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Setback from the East Lot Line	10	Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	10	Feet	Setback to Well	158 Feet
Setback to Drain Field	40	Feet		
Setback to Privy (Portable, Composting)		Feet		
<small>Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.</small>				
<small>Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.</small>				

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.
For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.
The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)		Sanitary Number: 17-1475		# of bedrooms: 1	Sanitary Date: 11/13/17	
Permit Denied (Date):		Reason for Denial:				
Permit #: 17-0472		Permit Date: 12-1-17				
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes (Deed of Record)	<input type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input type="checkbox"/> No	Affidavit Required	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is Parcel in Common Ownership	<input type="checkbox"/> Yes (Fused/Contiguous Lot(s))	<input type="checkbox"/> No	Mitigation Attached	<input type="checkbox"/> Yes <input type="checkbox"/> No	Affidavit Attached	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is Structure Non-Conforming	<input type="checkbox"/> Yes	<input type="checkbox"/> No				
Granted by Variance (B.O.A.)			Previously Granted by Variance (B.O.A.)			
<input type="checkbox"/> Yes <input type="checkbox"/> No Case #:			<input type="checkbox"/> Yes <input type="checkbox"/> No Case #:			
Was Parcel Legally Created			Were Property Lines Represented by Owner		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Was Proposed Building Site Delineated			Was Property Surveyed		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Inspection Record: too close to property line to issue w/o survey, stake is at far corner of Tenn's Courts, line appears to be going through current garage + proposed 1-story structure w/ H2O - no septic plans, yet (10/5/17)			Zoning District ()			
Date of Inspection: 10/5/17			Inspected by: Mader		Lakes Classification ()	
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No - (if No they need to be attached.)			Date of Re-Inspection:			
Signature of Inspector: Mader			Condition: May not be used for human habitation unless all applicable zoning/sanitary & UDC codes are fully met. + Remove old Garage by 9/1/2018			
Hold For Sanitary: <input type="checkbox"/>			Hold For TBA: <input type="checkbox"/>		Date of Approval: 11/28/17	
Hold For Affidavit: <input type="checkbox"/>			Hold For Fees: <input type="checkbox"/>		<input type="checkbox"/>	



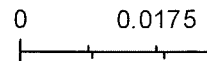
Recorded Map



State



Tie Lines



Survey
pile

11/11

5

40
27
sub

Town, City, Village, State or Federal
Permits May Also Be Required

LAND USE – X
SANITARY – 17-147S
SIGN –
SPECIAL –
CONDITIONAL –
BOA –

BAYFIELD COUNTY

PERMIT

WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION

No. **17-0472** Issued To: **Mogasheen Properties LLC / Henry Rieckhoff, Agent**

Location: - ¼ of - ¼ Section **34** Township **44** N. Range **6** W. Town of **Grand View**

E 20 Rods of

Gov't Lot **7** Lot Block Subdivision CSM#

For: **Commercial Accessory Structure: [2- Story; Garage (26' x 40') = 1,064 sq. ft.]**

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): May not be used for human habitation unless all applicable zoning, sanitary, conditional use, and UDC codes are fully met. Remove old garage by September 1, 2018.

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval.

This permit may be void or revoked if any of the application information is found

to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not

completed or if any prohibitory conditions are violated.

Tracy Pooler

Authorized Issuing Official

December 1, 2017

Date